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PTO/SB/83 (11-08) Approved for use through 11/30/2011. OMB 0651-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

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Application Number	10/690,362
Filing Date	10-21-2003
First Named Inventor	Edward Goldberg
Art Unit	3723
Examiner Name	ACKUN, JACOB K
Attorney Docket Number	287/11

P.O. Box 1450 Alexandria, VA 22313-1450						
Please withdraw me as attorney or agent for the above identified patent application, and						
all the practitioners of record;						
the practitioners (with registration numbers) of record listed on the attached paper(s); or						
the practitioners of record associated with Customer Number:27538						
NOTE: The immediately preceding box should only be marked when the practitioners were appointed using the listed Customer Number.						
The reason(s) for this request are those described in 37 CFR:						
10.40(b)(1) 10.40(b)(2) 10.40(b)(3) 10.40(b)(4)						
10.40(c)(1)(ii) 10.40(c)(1)(iii) 10.40(c)(1)(iii) 10.40(c)(1)(iv)						
10.40(c)(1)(v)						
10.40(c)(4) 10.40(c)(5) 10.40(c)(6) Please explain below:						
Certifications						
Check each box below that is factually correct. WARNING: If a box is left unchecked, the request will likely not be approved.						
I/We have given reasonable notice to the client, prior to the expiration of the response period, that the practitioner(s) intend to withdraw from employment.						
2.						
3. We have notified the client of any responses that may be due and the time frame within which the client must respond.						
Please provide an explanation, if necessary:						
[Page 1 of 2]						

This collection of information is required by 3T CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application. Confidentially is govered by \$5 U.S. C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to tale 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the annuant of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Giberr, U.S. Paetat and Trademark Office, U.S. Paeta of Trademark Office, U.S.

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Complete the following section only when the correspondence address will change. Changes of address will only be accepted to an inventor or an assignee that has properly made itself of record pursuant to 37 CFR 3.71.								
Change the correspondence address and direct all future correspondence to: A. The address of the inventor or assignee associated with Customer Number:								
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Address 501 Reis Avenue								
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I am authorized to sign on behalf of myself and all withdrawing practitioners.								
Signature s/Matthew B. I	ature s/Matthew B. Dernier/							
Name Matthew B. De	Matthew B. Dernier			Registration No. 40,989				
Address 900 Route 9 North								
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Date January 7, 201	January 7, 2010		Telephone No. 732-634-7634					
NOTE: Withdrawal is effective when approved rather than when received.								

[Page 2 of 2]
This collection of information is required by 37 CFR 1.36. The information is collection of information is required by 37 CFR 1.36. The information is collection of information is self-inated to take 12 minutes to complete, to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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